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DATE: September 29, 2008

PTO IDENTIFIER: Application Number 10/700,339-Conf. #5244

Patent Number

Inventor: Thomas A. Chodacki et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: EDWARDS ANGELL PALMER & DODGE LLP

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Attorney Dkt. #: 57119(72011)

PAGES (Including Cover Sheet): 15

CONTENTS: Fee Transmittal (1 page)
Five Month Request for Extension of Time Under 37 CFR 1.136(a) (2 pages)
Request for Continued Examination Transmittal (1 page)
Amendment
Charge \$3,040.00 to deposit account 04-1105
Certificate of Transmission (1 page)

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PTO/SB/97 (09-04)

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Application No. (if known): 10/700,339

Attorney Docket No.: 57119(72011)

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33,860

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Fee Transmittal (1 page)

Five Month Request for Extension of Time Under 37 CFR 1.136(a) (2 pages)

Request for Continued Examination Transmittal (1 page)

Amendment

Charge \$3,040.00 to deposit account 04-1105

SEP 29 2008

PTO/SB/17 (10-07)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2008 (H.R. 4818). FEE TRANSMITTAL For FY 2008		Complete if Known													
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/700,339-Conf. #5244</td> </tr> <tr> <td>Filing Date</td> <td>November 3, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Thomas A. Chodacki</td> </tr> <tr> <td>Examiner Name</td> <td>C. D. Price</td> </tr> <tr> <td>Art Unit</td> <td>3749</td> </tr> <tr> <td>Attorney Docket No.</td> <td>57119(72011)</td> </tr> </table>		Application Number	10/700,339-Conf. #5244	Filing Date	November 3, 2003	First Named Inventor	Thomas A. Chodacki	Examiner Name	C. D. Price	Art Unit	3749	Attorney Docket No.	57119(72011)
Application Number	10/700,339-Conf. #5244														
Filing Date	November 3, 2003														
First Named Inventor	Thomas A. Chodacki														
Examiner Name	C. D. Price														
Art Unit	3749														
Attorney Docket No.	57119(72011)														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">TOTAL AMOUNT OF PAYMENT</td> <td>(\$)</td> <td>3,040.00</td> </tr> </table>		TOTAL AMOUNT OF PAYMENT	(\$)	3,040.00											
TOTAL AMOUNT OF PAYMENT	(\$)	3,040.00													

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>04-1105</u> Deposit Account Name: <u>Edwards Angell Palmer & Dodge LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	310	155	510	255	210	105	_____
Design	210	105	100	50	130	65	_____
Plant	210	105	310	155	160	80	_____
Reissue	310	155	510	255	620	310	_____
Provisional	210	105	0	0	0	0	_____
							<u>Small Entity</u>
							<u>Fee (\$)</u> <u>Fee (\$)</u>
2. EXCESS CLAIM FEES							
<u>Fee Description</u>							
Each claim over 20 (including Reissues)							50 25
Each independent claim over 3 (including Reissues)							210 105
Multiple dependent claims							370 185
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>		
- 20 = _____		x	_____	=	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>		
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
- 3 = _____		x	_____	=			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
- 100 = _____	/ 50 = _____	(round up to a whole number) x		_____	= _____		
							<u>Fees Paid (\$)</u>
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1255 Extension for response within fifth month							2,230.00
1801 Request for continued examination (RCE) (see 37 ...)							610.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	33,860
Name (Print/Type)	Peter F. Corless	Telephone	(617) 517-5557
		Date	September 29, 2008

BOS2 696653.1